

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000046224

FILED  
Mar 19, 2011  
Secretary of State

Entity Name: MOLINANI INC.

**Current Principal Place of Business:**

20000 EAST COUNTRY CLUB DR.  
805  
AVENTURA, FL 33180 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 0822  
HALLANDALE, FL 33008 US

**New Mailing Address:**

FEI Number: 20-4118298

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GALANTE, ALBERT  
19195 NE 36 COURT  
2705  
AVENTURA, FL 33180 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: GALANTE, ALBERT  
Address: 20000 EAST COUNTRY CLUB DR. APT. 805  
City-St-Zip: AVENTURA, FL 33180 US

Title: DVP  
Name: GALANTE, MARLYNE  
Address: 20000 EAST COUNTRY CLUB DR. APT. 805  
City-St-Zip: AVENTURA, FL 33180 US

Title: DVP  
Name: GALANTE, LIANA  
Address: 20000 EAST COUNTRY CLUB DR. APT. 805  
City-St-Zip: AVENTURA, FL 33180 US

Title: DVP  
Name: GALANTE, MOISES  
Address: 20000 EAST COUNTRY CLUB DR. APT. 805  
City-St-Zip: AVENTURA, FL 33180 US

Title: DVP  
Name: GALANTE, NATALY  
Address: 20000 EAST COUNTRY CLUB DR. APT. 805  
City-St-Zip: AVENTURA, FL 33180 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALBERT GALANTE

DP

03/19/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date